CAMPAIGI LOCAL COMM					
Is This Report an Amendment:	DE	CEIVE			
Instructions for completing schedules are on the bac	JL 17 2021				
COMMITTEE IDENTIFICATION				CAN' I	
Name of Committee, Galvin for Alder Derson Di	strict 4		BY:	<i>y</i>	
Street Address 12,44 Emile Street	511161 7		OF	FICE USE ONLY	
City, State and Zip Code GPORN 1304 WIT 5431					
Please check if address is different than previously reported, an	d complete the Campaign Re	gistration State	ment in the l	back of this form. 🔲	
NAME OF REPORT		· · · · · · · · · · · · · · · · · · ·			
January Continuing Pre-Primary July Continuing Pre-Election	Spring	Fali [] S	Special	Termination Report also complete Schedule 4	
SUMMARY OF RECEIPTS AND DISBURSEMENTS	Column A This Period	Colum Calen	ndar	·	
1. RECEIPTS		Year-To	o-Date		
1A. Contributions (Including Loans) from Individuals	s - O -	\$ 273	8.39		
1B. Contributions from Committees (Transfers-In)	\$ -6-	\$ - 6			
IC. Other Income and Commercial Loans	s .06	s .06			
TOTAL RECEIPTS (Add totals from 1A, 1B and 1C)	s .06	\$.06		
2. DISBURSEMENTS		· · · · · · · · · · · · · · · · · · ·			
2A. Gross Expenditures	\$ ~ () ~	\$ va E) %		
2B. Contributions to Committees (Transfers-Out)	\$ ~ () ~	s · C) m)		
TOTAL DISBURSEMENTS (Add totals from 2A and 2B)	s - 0 -	\$ ~ 0	A _C gs.		
CASH SUMMARY					
Cash Balance Beginning of Report	s 2338.39				
Total Receipts	s .06]			
Subtotal	s 2338.45]			
Total Disbursements	\$]			
CASH BALANCE END OF REPORT	\$ 2338,45		•		
INCURRED OBLIGATIONS (Balance at the Close of This Period-3A)	\$ vai. () or ?	ŀ			
LOANS (Balance at the Close of This Period-3B)					
I certify that I have examined this report and to the best of n	ny knowledge and belief it i	is true, correct	and compl	ete.	
Type or Print Name of Candidate of Treasurer. Sig	mature of Candidate or Treasurer	0 6 6 6 1	Date: 7	-17-2021	
Darlene Marcelle B	mature of Candidate or Treasurer Lule ne Marie nail domaric e/i	le ogmai		Phone: 468-1191	

NOTE: The information on this form is required by ss. 11.0204, 11.0304, 11.0504, 11.0504, 11.0804, 11.0904, Wis. Stats. Failure to provide the information may subject you to the penalties of ss.11.1400, 11.1401, Wis. Stats.

SCHEDULE 1-A

RECEIPTS Contributions (Including Loans) From Individuals

Page 2 of 2

Complete Com	nittee Name V for Alderperson-Gre	ENBAY Didtrict4				
Instructions for completing schedules are on the back of each schedule,						
Uew .	Of Contributor	Occupation (if year-to-date total exceeds \$200)	Amount of Contribution	Y-T-D Total		
3/10/21	Interest on					
(00° 1	Checking			.06		
through	account					
6/18/202	Of Contributor TNTEVESTON Check IN A ACCOLLNT Check It: @In-Kind @Loan@Conduit - Ethics ID#					
	Check if: ☐ In-Kind ☐ Loan☐ Conduit — Ethics ID#					
	Check if: [] in-Kind [] Loan[] Conduit - Ethics ID#					
	Office at Editorial Conductor Concession	<u> </u>				
			*			
	Check if: In-Kind Loan Conduit - Ethics ID#					
f						
	Check if: In-Kind Loan Conduit - Ethics ID#					
	Check if: ☐ In-Kind ☐ Loan Conduit - Ethics ID#					
-	·					
	Check if: ☐ In-Kind ☐ Loan☐ Conduit ~ Ethics ID#					
	SUBTOTAL	\$.06			
TOTAL ITEMIZED CONTRIBUTIONS			\$			
TOTAL ANONYMOUS CONTRIBUTIONS \$10 OR LESS			\$			
	TOTAL CONTRIB	\$	06			

SCHEDULE 1-B

RECEIPTS Contributions from Committees (Transfers-In)

Page 3 of 3

Complete Committee Name	Alderperson-Gree	N Ray District of
1341 117 147	1190115	<u></u>

instructions for completing schedules are on the back of each schedule. Date Full Name of Committee, Mailing Address and Zip Code **Amount of Contribution** Check if: DIn-Kind DLoan Check if: [In-Kind [Loan Check if: C in-Kind C Loan Check if: I In-Kind Loan Check if: [i] In-Kind [i] Loan Check if: in-Kind Loan Check if: I In-Kind Loan Check if: I In-Kind I Loan Check if: In-Kind I Loan SUBTOTAL CONTRIBUTIONS (Transfers-in) THIS PAGE | \$ TOTAL CONTRIBUTIONS (Transfers-In) RECEIVED FROM COMMITTEES | \$

SCHEDULE 1-C

RECEIPTS Other Income and Commercial Loans

Page 4 of 4

Galvin for Alder person-Green Bay-Districty						
Instructions for completing schedules are on the back of each schedule.						
Date	Full Name, Mailing Address and Zip Code of Source of Income	Type of income	Amount			
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			o deliberation of the second o			
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į						
		SUBTOTAL OTHER INCOME THIS PAGE	* · O -			
		TOTAL ITEMIZED OTHER INCOME	s			
			٠٠٠ س			
		TOTAL OTHER INCOME	\$ "()"			



DISBURSEMENTS Gross Expenditures

Page <u>5</u> of <u>5</u>

Date	completing schedules are on the back of each schedule.		
Date	Full Name, Mailing Address and Zip Code Of Person or Business to Whom Payment is Made	Specific Purpose of Expenditure	Amount
			ì
	Check if: In-Kind Offset	+///	
		11/0	
	Check If: [t] In-Kind Offset		
······································	Olovery Et Hand Olast		
· ··· ···	Check if:		
****	Check if: in-Kind Offset		
	Check if: tn-Kind Offset	•	
	Check if: In-Kind Offset		
	Check #: 디 in-Kind Offset		
	14 11 11 11 11 11 11 11 11 11 11 11 11 1		
	Check if:		
	SU	BTOTAL ITEMIZED EXPENDITURES THIS PAGE	\$. 0 .
TATEL HOPELINGE DIRECTOR OF THE PARTY OF THE			
TOTAL ITEMIZED EXPENDITURES			
		TOTAL UNITEMIZED EXPENDITURES	\$
		TOTAL EXPENDITURES	0 -

SCHEDULE 2-B

DISBURSEMENTS Contributions To Committees (Transfers-Out)

Page 6 of 6

Galvin for Alderperson-Green Bay-District 4						
Instructions for completing schedules are on the back of each schedule.						
Date	Full Name, Mailing Address and Zip Code	Amount	Y-T-D Total			
	y.					
	Check if: 🔃 In-Kind 🗔 Loan					
<u> </u>						
	Check if: In-Kind 🖸 Loan					
	CHECK II. [1] #PARE [1] LOSII		***************************************			
	Check if: 🖸 In-Kind 🖸 Loan					
‡ :	Check if: [] In-Kind [] Loan					
		,				
	Check if: 🖸 in-Kind 🖸 Loan					
	Check if: I In-Kind Loan					
	Check if: In-Kind Ci.oan		- //- /			
	Check if: 🖸 In-Kind 🖂 Loan					
	Check if: [] In-Kind [] Loan					
	SUBTOTAL CONTRIBUTIONS (Transfers-Out) THIS PAGE	\$	~ O ~			
	TOTAL CONTRIBUTIONS (Transfers-Out) MADE TO COMMITTEES	\$	-0-			

SCHEDULE 3-A

Incurred Obligations Excluding Loans ADDITIONAL DISCLOSURE

Page of 7

\wedge	writtee Name V for Alderperson-Gr	reen Bay-Di	strict4		
Instructions	for completing schedules are on the back of each	schedule.			
		Outstanding Balance Beginning This Period	New Obligations or Additions This Period	Cumulative Payments This Period	Outstanding Balance At Close of This Period
Date	Full Name, Mailing Address and Zip Code of Creditor				
t t		Nature of Debt (Purpose)	1//	······································	
Date	Full Name, Mailing Address and Zip Code of Creditor				
f t		Nature of Debt (Purpose)	1		
Date	Full Name, Mailing Address and Zip Code of Creditor				
1 1		Nature of Debt (Purpose)		,, , , , , , , , , , , , , , , , , , ,	
Date	Full Name, Mailing Address and Zip Code of Creditor				
1 1		Nature of Debt (Purpose)		£	
Date	Full Name, Mailing Address and Zip Code of Creditor				
1 1		Nature of Debt (Purpose)			
Date	Full Name, Mailing Address and Zip Code of Creditor				
1 1		Nature of Debt (Purpose)			
· · · · · · · · · · · · · · · · · · ·			·		
Date	Full Name, Mailing Address and Zip Code of Creditor				
/ /		Nature of Debt (Purpose)			
Date	Full Name, Mailing Address and Zip Code of Creditor				
1 1		Nature of Debt (Purpose)			
		SUBTOTAL ITEMIZE	D OBLIGATIONS THIS	PAGE \$	-0-
		TOT	'AL ITEMIZED OBLIGA	TIONS \$	~ () ·
		TOTAL UNITENIZED	OBLIGATIONS \$20 OR	LESS \$	0-
		тоти	AL INCURRED OBLIGA	TIONS \$	0-

SCHEDULE 3-B

Loans Individual, Committee or Commercial ADDITIONAL DISCLOSURE

Page \underline{S} of \underline{S}

Galvin	for Alderperson-Gree	WBay-Di	strict4			
Instructions fo	r completing schedules are on the back of each s	schedule.				
Date	Full Name, Mailing Address and Zip Code of Loan Source		Outstanding Obligations Beginning of This Period	New Loans This Period	Cumulative Payments This Period	Outstanding Obligations End of This Period
1 1	////	1				
List All Endorse	rs or Guarantors (if any)					
Full Name, Mai of Guarantor	Ing Address and Zip Code	Occupation				
		Amount Guarantee	ed Outstanding			
Full Name, Mai of Guarantor	ling Address and Zip Code	Occupation		,		
		Amount Guarantee	ed Outstanding			
	Full Name, Mailing Address and Zip Code of Loan Sor	urce	Outstanding Obligations Beginning of This Period	New Loans This Period	Cumulative Payments This Period	Outstanding Obligations End of This Period
Date / /	·					
List All Endorse	Lers or Guarantors (if any)		<u> </u>	<u></u>		
Full Name, Ma of Guarantor	ling Address and Zlp Code	Occupation				
		Amount Guarantee	ed Outstanding			
Full Name, Ma	ling Address and Zip Code	Occupation				
		Amount Guarante	ed Outstanding			
Date	Full Name, Mailing Address and Zip Code of Loan So	urce	Outstanding Obligations Beginning of This Period	New Loans This Period	Cumulative Payments This Period	Outstanding Obligations End of This Period
1 1				<u> </u>		
List All Endors	ers or Guarantors (if any)	· . · · · · · · · · · · · · · · · · · ·				
Full Name, Ma of Guarantor	ling Address and Zip Code	Occupation				
		Amount Guarante	ed Outstanding			
Full Name, Mailing Address and Zip Code of Guarantor		Occupation				
		Amount Guarante	ed Outstanding			
<u> </u>			SUBTOTAL C	UTSTANDING LOA	INS THIS PAGE	s - O-
					NDING LOANS	s-O-